




PTO/SB/31 (08-03)  
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| <b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>  |  | <b>Docket Number (Optional)</b><br>A8130.0012/P012                                   |                             |
|   |  | In re Application of<br>Reinhold Schmieding et al.                                   |                             |
|   |  | Application Number<br>09/981,754-Conf. #6107   | Filed<br>October 19, 2001   |
|   |  | For INTERACTIVE TEMPLATE FOR ANIMATED SURGICAL<br>TECHNIQUE CD ROM                   |                             |
|   |  | Art Unit<br>3713   | Examiner<br>K. M. Christman |
| Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.  |  |  |                             |
| The fee for this Notice of Appeal is (37 CFR 1.17(b))   |  | \$ 330.00  |                             |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:   |  | \$ 165.00  |                             |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |  |  |                             |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |  |  |                             |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.  |  |  |                             |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>04-1073</u> . I have enclosed a duplicate copy of this sheet. |  |  |                             |
| <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.  |  |  |                             |
| I am the  |  |  |                             |
| <input type="checkbox"/> applicant /inventor  |  | Signature  |                             |
| <input type="checkbox"/> assignee of record of the entire interest.<br>See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  |  | Stephen A. Soffen<br>Typed or printed name   |                             |
| <input checked="" type="checkbox"/> attorney or agent of record.<br>Registration number <u>31,063</u>   |  | (202) 828-4879<br>Telephone number   |                             |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a).<br>Registration number if acting under 37 CFR 1.34(a) _____   |  | March 15, 2004<br>Date   |                             |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.                            |  |  |                             |
| <input type="checkbox"/> *Total of <u>1</u> forms are submitted.  |  |  |                             |

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